

Senate File 313 - Introduced

SENATE FILE 313
BY COMMITTEE ON HUMAN
RESOURCES

(SUCCESSOR TO SSB 1100)

A BILL FOR

- 1 An Act relating to medical assistance program-related
- 2 provisions.
- 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 8A.504, subsection 1, paragraph c,
2 subparagraph (1), Code 2011, is amended to read as follows:

3 (1) Any debt, which is assigned to the department of human
4 services, or which is owed to the department of human services
5 for unpaid premiums under section 249A.3, subsection 2,
6 paragraph "a", subparagraph (1), or section 249J.8, subsection
7 1, or which the child support recovery unit is otherwise
8 attempting to collect, or which the foster care recovery unit
9 of the department of human services is attempting to collect
10 on behalf of a child receiving foster care provided by the
11 department of human services.

12 Sec. 2. Section 217.34, Code 2011, is amended to read as
13 follows:

14 **217.34 Debt setoff.**

15 The investigations division of the department of inspections
16 and appeals and the department of human services shall provide
17 assistance to set off against a person's or provider's income
18 tax refund or rebate any debt which has accrued through written
19 contract, nonpayment of premiums pursuant to section 249A.3,
20 subsection 2, paragraph "a", subparagraph (1), or section
21 249J.8, subsection 1, subrogation, departmental recoupment
22 procedures, or court judgment and which is in the form of a
23 liquidated sum due and owing the department of human services.
24 The department of inspections and appeals, with approval of the
25 department of human services, shall adopt rules under chapter
26 17A necessary to assist the department of administrative
27 services in the implementation of the setoff under section
28 8A.504 in regard to money owed to the state for public
29 assistance overpayments or nonpayment of premiums as specified
30 in this section. The department of human services shall adopt
31 rules under chapter 17A necessary to assist the department of
32 administrative services in the implementation of the setoff
33 under section 8A.504, in regard to collections by the child
34 support recovery unit and the foster care recovery unit.

35 Sec. 3. Section 249A.3, subsection 2, paragraph a,

1 subparagraph (1), Code 2011, is amended to read as follows:

2 (1) (a) As allowed under 42 U.S.C.
3 § 1396a(a)(10)(A)(ii)(XIII), individuals with disabilities,
4 who are less than sixty-five years of age, who are members of
5 families whose income is less than two hundred fifty percent of
6 the most recently revised official poverty guidelines published
7 by the United States department of health and human services
8 for the family, who have earned income and who are eligible for
9 medical assistance or additional medical assistance under this
10 section if earnings are disregarded. As allowed by 42 U.S.C.
11 § 1396a(r)(2), unearned income shall also be disregarded in
12 determining whether an individual is eligible for assistance
13 under this subparagraph. For the purposes of determining the
14 amount of an individual's resources under this subparagraph
15 and as allowed by 42 U.S.C. § 1396a(r)(2), a maximum of ten
16 thousand dollars of available resources shall be disregarded,
17 and any additional resources held in a retirement account, in a
18 medical savings account, or in any other account approved under
19 rules adopted by the department shall also be disregarded.

20 (b) Individuals eligible for assistance under this
21 subparagraph, whose individual income exceeds one hundred
22 fifty percent of the official poverty guidelines published
23 by the United States department of health and human services
24 for an individual, shall pay a premium. The amount of the
25 premium shall be based on a sliding fee schedule adopted by
26 rule of the department and shall be based on a percentage of
27 the individual's income. The maximum premium payable by an
28 individual whose income exceeds one hundred fifty percent of
29 the official poverty guidelines shall be commensurate with
30 the cost of state employees' group health insurance in this
31 state. The payment to and acceptance by an automated case
32 management system or the department of the premium required
33 under this subparagraph shall not automatically confer initial
34 or continuing program eligibility on an individual. A premium
35 paid to and accepted by the department's premium payment

1 process that is subsequently determined to be untimely or to
2 have been paid on behalf of an individual ineligible for the
3 program shall be refunded to the remitter in accordance with
4 rules adopted by the department. Any unpaid premium shall be a
5 debt owed the department.

6 Sec. 4. Section 249J.8, subsection 1, Code 2011, is amended
7 to read as follows:

8 1. a. ~~Each~~ The total monthly premium and other cost-sharing
9 for an expansion population member whose family income exceeds
10 one hundred fifty percent of the federal poverty level as
11 defined by the most recently revised poverty income guidelines
12 published by the United States department of health and human
13 services shall ~~pay a monthly premium~~ not to exceed one-twelfth
14 of five percent of the member's annual family income regardless
15 of the number of expansion population members in the household.
16 The department shall adopt rules to establish a premium
17 schedule in accordance with this subsection that is calculated
18 based on a member's family income for each ten percent
19 increment of the federal poverty level.

20 b. ~~Each~~ An expansion population member whose family income
21 is equal to or less than one hundred fifty percent of the
22 federal poverty level as defined by the most recently revised
23 poverty income guidelines published by the United States
24 department of health and human services shall not be subject to
25 payment of a monthly premium.

26 c. All premiums shall be paid ~~on~~ by the last day of the
27 month of coverage.

28 d. The department shall deduct the amount of any monthly
29 premiums paid by an expansion population member for benefits
30 under the healthy and well kids in Iowa program when computing
31 the amount of monthly premiums owed under this subsection.

32 e. An expansion population member shall respond to the
33 monthly premium notices either through timely payment or a
34 request for a hardship exemption during the entire period of
35 the member's enrollment.

1 f. Regardless of the length of enrollment, the member
2 is subject to payment of the premium for a minimum of four
3 consecutive months. However, an expansion population member
4 who complies with the requirement of payment of the premium
5 for a minimum of four consecutive months during a consecutive
6 twelve-month period of enrollment shall be deemed to have
7 complied with this requirement for the subsequent consecutive
8 twelve-month period of enrollment and shall only be subject to
9 payment of the monthly premium on a month-by-month basis.

10 g. Timely payment of premiums, ~~including any arrearages~~
11 ~~accrued from prior enrollment,~~ is a condition of receiving any
12 expansion population services. An expansion population member
13 who does not provide timely payment within sixty days of the
14 date the premium is due is subject to disenrollment.

15 h. Any unpaid premiums are a debt owed to the department.

16 i. The payment to and acceptance by an automated case
17 management system or the department of the premium required
18 under this subsection shall not automatically confer initial or
19 continuing program eligibility on an individual.

20 j. A premium paid to and accepted by the department's
21 premium payment process that is subsequently determined to
22 be untimely or to have been paid on behalf of an individual
23 ineligible for the program shall be refunded to the remitter in
24 accordance with rules adopted by the department.

25 k. Premiums collected under this subsection shall be
26 deposited in the premiums subaccount of the account for health
27 care transformation created pursuant to section 249J.23.

28 l. An expansion population member shall also pay the same
29 copayments required of other adult recipients of medical
30 assistance.

31 Sec. 5. Section 249J.14, subsection 5, Code 2011, is amended
32 to read as follows:

33 5. *Dental home for children.*

34 a. The department shall enter into an interagency agreement
35 with the department of public health for infrastructure

1 development and oral health coordination services for
2 recipients of medical assistance to increase access to dental
3 care for medical assistance recipients.

4 b. By ~~December 31, 2011~~ July 1, 2013, every recipient
5 of medical assistance who is a child twelve years of age or
6 younger shall have a designated dental home and shall be
7 provided with the dental screenings, preventive services,
8 diagnostic services, treatment services, and emergency services
9 as defined under the early and periodic screening, diagnostic,
10 and treatment program.

11 EXPLANATION

12 This bill relates to medical assistance program-related
13 provisions. The bill provides that unpaid premiums under the
14 Medicaid for employed people with disabilities (MEPD) program
15 and the IowaCare program are considered "qualifying debts"
16 subject to debt setoff procedures.

17 The bill amends provisions relating to financial
18 participation of IowaCare members to comply with federal
19 requirements for renewal of the IowaCare waiver. Under the
20 bill, IowaCare members with household incomes at or below
21 150 percent of the federal poverty level (FPL) would not be
22 assessed a monthly premium. Those with incomes greater than
23 150 percent of the FPL, regardless of the number of IowaCare
24 members in the household, would be assessed a monthly premium
25 not to exceed one-twelfth of 5 percent of the household's
26 monthly income in accordance with federal requirements. The
27 bill also provides that a member is subject to disenrollment if
28 premiums are not paid within 60 days of the date the premiums
29 are due.

30 The bill extends the date by which all children 12 years
31 of age or younger are to have a designated dental home from
32 December 31, 2011, until July 1, 2013.